



LINCOLN POLICE DEPARTMENT
575 South 10th Street Lincoln, NE 68508
402-441-7204 fax: 402-441-8492 lincoln.ne.gov

October 13, 2014

Mayor Beutler and City Council
City of Lincoln
City County Building
Lincoln, NE

Mayor Beutler and Members of the City Council:

An investigation has been made regarding the application of Rupert Enterprises LLC, DBA T's Stop & Shop, 2801 O Street, requesting a class B liquor license.


The president of Rupert Enterprises LLC, Terrance Rupert, has requested that he be approved as the manager of the liquor license.

Mr. Rupert is purchasing the Git 'N Split business at this location, which currently holds a class B liquor license.

The applicant has not yet completed the required management training.

No areas of concern were found.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.


JIM PESCHONG, Chief of Police



A nationally accredited law enforcement agency



APPLICATION FOR LIQUOR LICENSE CHECKLIST - RETAIL

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: www.lcc.ne.gov

RECEIVED	
SEP 30 2014	
NEBRASKA LIQUOR CONTROL COMMISSION	
QA	Rep. 16363
B	110061
	mf

Applicant name Rupert Enterprises, LLC

Trade name T's Stop and Shop

Previous trade name _____

Contact email address rupert_terry@yahoo.com

Provide all the items requested. Failure to provide any item will cause this application to be returned or placed on hold. All documents must be legible. Any false statement or omission may result in the denial, suspension, cancellation or revocation of your license. If your operation depends on receiving a liquor license, the Nebraska Liquor Control Commission cautions you that if you purchase, remodel, start construction, spend or commit money that you do so at your own risk. Prior to submitting your application review the application carefully to ensure that all sections are complete, and that any omissions or errors have not been made. You may want to check with the city/village or county clerk, where you are making application, to see if any additional requirements must be met before submitting application to the state.


REQUIRED ATTACHMENTS

Each item must be checked and included with application or marked N/A (not applicable).

☒ 1. Fingerprint cards for each person (two cards per person) must be enclosed with a check payable to the Nebraska State Patrol for processing in the amount of \$38.00 per person. All areas must be completed on cards as per brochure. To prevent the delay in issuing your license, we strongly suggest you go to any Nebraska State Patrol office. See fingerprint brochure

☒ 2. Enclose application fee of \$400, check made payable to the Nebraska Liquor Control Commission.

PAYMENT TYPE	CK #2740
AMOUNT	\$400.00
RECEIPT	168139
INITIALS	mf


1400023424

FORM 100
REV 12/2013
PAGE 1

X OK

3) Enclose the appropriate application forms:

Individual license (requires insert form 1- form number 104)

Partnership license (requires insert form 2- form number 105)

Corporate license (requires insert form 3a & 3c- form number 101 and 103)

Limited liability company (LLC) (requires form 3b & 3c- form number 102 and 103)

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NEBRASKA LIQUOR
CONTROL COMMISSION

N/A

4) If building is being leased send a copy of signed lease. Lease must be in the name of the individual, corporation or limited liability company making application. Lease term must run through the license year being applied for (see page 3).

X OK

5) If building is owned or being purchased send a copy of the deed or purchase agreement in the name of the applicant.

X OK

6) If buying the business of a current liquor license holder:

a) Provide a copy of the purchase agreement from the seller (must read applicants name).

b) Provide a copy of alcohol inventory being purchased (must include brand names and container size)

c) Enclose a list of the assets being purchased (furniture, fixtures and equipment).

X OK

7) If requesting to operate on current liquor license; enclose Temporary Operating Permit (TOP)(form 125).

X

8. Enclose a list of any inventory or property owned by other parties that are on the premise.

X OK

9. For citizenship enclose copy of U.S. birth certificate; U.S. passport or naturalization paper

For residency enclose proof of registered voter in Nebraska

See guideline for further assistance <http://www.lcc.nebraska.gov/brochures.html>

X OK

10. Corporation or Limited Liability Company must enclose a copy of articles of incorporation; as filed with the Secretary of State's Office. This document must show barcode stamp.

X OK

11. Submit a copy of your business plan.

I acknowledge that this application is not a guarantee that a liquor license will be issued to me, and that the average processing period is 60 days. Furthermore, I understand that all the information is truthful and I accept all responsibility for any false documents.

Jeanne T. Ruffert

Signature

9-25-14

Date

Affidavit signed
bus plan
TOP
alcohol inv.
eqmt inv.
lease assignment
- from corp
PMA business
PMA business

**APPLICATION FOR LIQUOR LICENSE
RETAIL**

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**CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND FEES
CHECK DESIRED CLASS**

RETAIL LICENSE(S)

Submit \$400 Non Refundable Application Fee

- ☐ A BEER, ON SALE ONLY
- ☒ B BEER, OFF SALE ONLY
- ☐ C BEER, WINE, DISTILLED SPIRITS, ON AND OFF SALE
- ☐ D BEER, WINE, DISTILLED SPIRITS, OFF SALE ONLY
- ☐ I BEER, WINE, DISTILLED SPIRITS, ON SALE ONLY
- ☐ AB BEER, ON AND OFF SALE
- ☐ AD BEER ON SALE ONLY, BEER, WINE, DISTILLED SPIRITS OFF SALE
- ☐ IB BEER, WINE, DISTILLED SPIRITS ON SALE, BEER OFF SALE ONLY
- ☐ ID BEER, WINE, DISTILLED SPIRITS ON AND OFF SALE

- ☐ Class K Catering license (requires catering application form 106) \$100.00

Additional fees will be assessed at city/village or county level when license is issued

LICENSE YEAR

Class C license term runs from November 1 – October 31
All other licenses run from May 1 – April 30
Catering license (K) expires same as underlying retail license

**CHECK TYPE OF LICENSE FOR WHICH YOU ARE APPLYING
(CHECK ONLY ONE)**

- ☐ Individual License (requires insert form 1- form number 104)
- ☐ Partnership License (requires insert form 2- form number 105)
- ☒ Corporate License (requires insert form 3a & 3c- form number 101 and 103)
- ☐ Limited Liability Company (LLC) (requires form 3b & 3c- form number 102 and 103)

NAME OF ATTORNEY OR FIRM ASSISTING WITH APPLICATION (if applicable)
Commission will call this person with any questions we may have on this application

Name Patrick T. O'Brien Phone number: (402) 475-0811

Firm Name Butler, Galter & O'Brien

PREMISE INFORMATIONTrade Name (doing business as) T's Stop & ShopStreet Address #1 2801 "O" Street

Street Address #2 _____

City LincolnCounty LancasterZip Code 68510Premise Telephone number (402) 601-4771Business e-mail address N/A

Is this location inside the city/village corporate limits:



YES



NO

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Mailing address (where you want to receive mail from the Commission)

Name Terrance T. RupertRECEIVED
NEBRASKA LIQUOR
CONTROL COMMISSIONStreet Address #1 1401 W. Saltillo Road

Street Address #2 _____

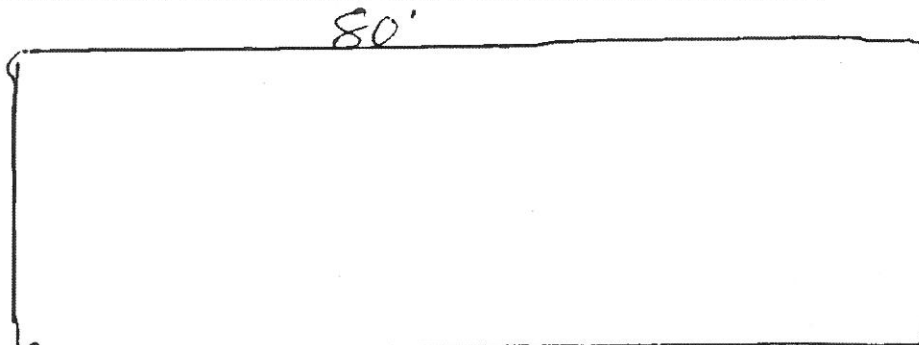
City RocaState NEZip Code 68430**DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED****READ CAREFULLY**

In the space provided or on an attachment draw the area to be licensed. This should include storage areas, basement, outdoor area, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building. **No blue prints please.** Be sure to indicate the direction **north** and **number of floors** of the building.

****For on premise consumption liquor licenses minimum standards must be met by providing at least two restrooms**

Building: length 80 x width 30 in feetIs there a basement to be licensed? Yes ☒ No ☐ If yes, length 80 x width 30 in feetIs there an outdoor area? Yes ☒ No ☐ If yes, length 80 x width 30 in feet

PROVIDE DIAGRAM OF AREA TO BE LICENSED BELOW OR ATTACH SEPARATE SHEET



One story bldg approx 80' x 30'
including basement

OK
Per
Pat O'Brien

APPLICANT INFORMATION

1. **READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY §53-125(5)**

Has anyone who is a party to this application, or their spouse, **EVER** been convicted of or plead guilty to any charge. Charge means any charge alleging a felony, misdemeanor, violation of a federal or state law; a violation of a local law, ordinance or resolution. Include traffic violations. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name. The commission must be notified of any arrests and/or convictions that may occur after the date of signing this application.

☒ YES ☐ NO

If yes, please explain below or attach a separate page

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NEBRASKA LIQUOR

CONTROL COMMISSION

Name of Applicant	Date of Conviction (mm/yyyy)	Where Convicted (city & state)	Description of Charge	Disposition
See attached				

2. Are you buying the business of a current retail liquor license?

☒ YES ☐ NO

B16363

If yes, give name of business and liquor license number

a) Submit a copy of the sales agreement

b) Include a list of alcohol being purchased, list the name brand, container size and how many

c) Submit a list of the furniture, fixtures and equipment

3. Was this premise licensed as liquor licensed business within the last two (2) years?

☒ YES ☐ NO

GNS Corporation; B16363

If yes, give name and license number

4. Are you filing a temporary operating permit to operate during the application process?

☒ YES ☐ NO

If yes:

a) Attach temporary operating permit (TOP) (form 125)

b) TOP will only be accepted at a location that currently holds a valid liquor license.

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CONTROL COMMISSION

Lancaster County	Discharge Firearm (Misdemeanor)	\$75.00 Fine	Sentenced...11-18-1979 Case No: B42491 (Citation No: E296004)
Lancaster County	Assault (Misdemeanor)	\$25.00 Fine	Sentenced...11-18-1979 Case No: B42491 (Citation No: E296004)
Lancaster County	Inmate Of A Disorderly House (Misdemeanor)	\$50.00 Fine	Sentenced...11-08-1984 Case No: 84-70648 (Citation No: F259969)
Lancaster County	Erect Construct Building Within 3 Mile Of City Limit (Misdemeanor)	\$50.00 Fine	Sentenced...10-21-1991 Case No: 91030870 (Citation No: XX91000377)
Lancaster County	Second Degree Assault (Felony)	3 Years Probation	Sentenced...08-12-1996 Doc. 639; Page 234

Pardon Granted
See Attached

#1

STATE OF NEBRASKA

BOARD OF PARDONS

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In the Matter of a Pardon to)
TERRANCE T. RUPERT)
AKA: TERRY T. RUPERT)

SEP 30 2014

NEBRASKA LIQUOR
CONTROL COMMISSION

KNOW ALL MEN BY THESE PRESENTS:

WHEREAS, Mr. Terrance T. Rupert (aka: Terry T. Rupert) was heretofore convicted of the following Nebraska offense(s): Convicted in the District and County Courts of Lancaster County, Nebraska and sentenced on November 18, 1979 to a \$75.00 fine for the misdemeanor offense of Discharge Firearm and to a \$25.00 fine for the misdemeanor offense of Assault; sentenced on November 8, 1984 to a \$50.00 fine for the misdemeanor offense of Inmate of a Disorderly House; sentenced on October 21, 1991 to a \$50.00 fine for the misdemeanor offense of Erect Construct Building Within Three Miles of City Limit; and sentenced on August 12, 1996 to a term of three years probation for the felony offense of Second Degree Assault, and now having made application for a pardon from such offense(s); and

WHEREAS, the Board of Pardons did consider such application at its meeting of the proceedings in connection therewith being recorded in Docket Number 7 of the Board at page 104; and

WHEREAS, upon consideration of the application and the evidence submitted in support thereof, the Board did find that the said Mr. Terrance T. Rupert is a fit subject for clemency, that the public good would be served by granting such application, and that a pardon should be bestowed by the government through its duly authorized officers, as an act of grace;

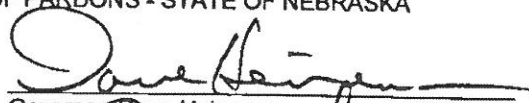
NOW, THEREFORE, the Board of Pardons of the State of Nebraska by virtue of the authority vested in it by the Constitution and the Laws of the State of Nebraska does hereby grant a full pardon to Mr. Terrance T. Rupert for the offense(s) above set forth, and

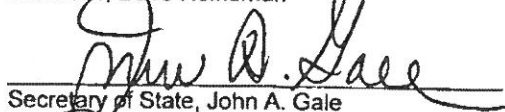
FURTHER, in accordance with the Constitution and Laws of the State of Nebraska the Governor is empowered to authorize and does so authorize, through his/her signature hereto, the said Mr. Terrance T. Rupert to receive, possess, or transport in commerce a firearm in accordance with the exemption provided by the Federal Gun Control Act of 1968 (Title 18 U.S.C. Chapter 44 § § 921- 931) insofar as the offense(s) herein involved is concerned.

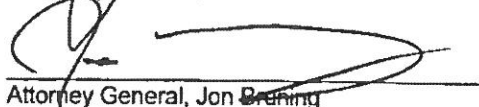
IN WITNESS WHEREOF, we have affixed our signatures hereto at Lincoln, Nebraska this 11th day of September 2012.

BOARD OF PARDONS - STATE OF NEBRASKA




Governor, Dave Heineman


Secretary of State, John A. Gale


Attorney General, Jon Bruning

5. Are you borrowing any money from any source, including family or friends, to establish and/or operate the business?

☒ YES ☐ NO

If yes, list the lender(s) Larry W. Coffey

6. Will any person or entity, other than applicant, be entitled to a share of the profits of this business?

☐ YES ☒ NO

If yes, explain. (All involved persons must be disclosed on application)

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No silent partners

7. Will any of the furniture, fixtures and equipment to be used in this business be owned by others?

☐ YES ☒ NO

If yes, list such item(s) and the owner.

8. Is premise to be licensed within 150 feet of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, and children, or within 300 feet of a college or university campus?

☒ YES ☐ NO

If yes, provide name and address of such institution and where it is located in relation to the premises (Neb. Rev. Stat. §53-177)(1)

9. Is anyone listed on this application a law enforcement officer?

☐ YES ☒ NO

If yes, list the person, the law enforcement agency involved and the person's exact duties

10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business

a) List the individual(s) who will be authorized to write checks and/or withdrawals on accounts at this institution.

Security First Bank; Terrance T. Rupert

11. List all past and present liquor licenses held in Nebraska or any other state by any person named in this application. Include license holder name, location of license and license number. Also list reason for termination of any license(s) previously held.

Grandpa's Ribs; 1980; number unknown; business sold in 1995

12. List the alcohol related training and/or experience (when and where) of the person(s) making application. Those persons required are listed as followed:

- a) Individual, applicant only (no spouse)
- b) Partnership, all partners (no spouses)
- c) Corporation, manager only (no spouse) as listed on form 3c
- d) Limited Liability Company, manager only (no spouse) as listed on form 3c

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NLCC certified training program completed:

Applicant Name	Date (mm/yyyy)	Name of program (attach copy of course completion certificate)
Terrance T. Rupert	09/2014	NE Off-Premises Responsible Serving

Attached cert. w/ mgr
App

For list of NLCC certified training programs see: www.lcc.ne.gov/traininginfo.html

Experience:

Applicant Name/Job Title	Date of Employment:	Name & Location of Business
Terrance T. Rupert, Owner	1980-1995	Grandpa's Ribs; 27th & Dudley, Lincoln, NE

13. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership. If leased, submit a copy of the lease covering the entire license year. **Documents must show title or lease held in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed.**

- ☐ Lease: expiration date _____
- ☐ Deed
- ☒ Purchase Agreement

14. When do you intend to open for business? October 15, 2014

15. What will be the main nature of business? Convenience store/gas station

16. What are the anticipated hours of operation? 6:00 a.m. to midnight

17. List the principal residence(s) for the past 10 years for all persons required to sign on page 8, including spouses.

RESIDENCES FOR THE PAST 10 YEARS, APPLICANT AND SPOUSE MUST COMPLETE

APPLICANT CITY & STATE	YEAR FROM	YEAR TO	SPOUSE CITY & STATE	YEAR FROM	YEAR TO
Lincoln, Nebraska	2004	present	Lincoln, Nebraska	2004	present

If necessary attach a separate sheet.

**MANAGER APPLICATION
INSERT - FORM 3c**

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: www.lcc.ne.gov

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NEBRASKA LIQUOR
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MUST BE:

- ✓ **Citizen of the United States. Include copy of US birth certificate, naturalization paper or current US passport**
- ✓ **Nebraska resident. Include copy of voter registration in the State of Nebraska**
- ✓ **Fingerprinted. Two cards per person, fees of \$38 per person, made payable to Nebraska State Patrol. If printed at NSP mail check only.**
- ✓ **21 years of age or older**

Corporation/LLC information

Name of Corporation/LLC: Rupert Enterprises, LLC

Premise information

Liquor License Number: _____ Class Type B
(if new application leave blank)

Premise Trade Name/DBA: T's Stop & Shop

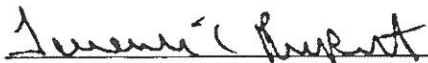
Premise Street Address: 2801 "O" Street

City: Lincoln County: Lancaster Zip Code: 68510

Premise Phone Number: 402-435-6621

Email address: rupert_terry@yahoo.com

The individual whose name is listed as a corporate officer or managing member as reported on insert form 3a or 3b or listed with the Commission. Click on this link to see authorized individuals.
http://www.lcc.ne.gov/license_search/licsearch.cgi



SIGNATURE REQUIRED BY CORPORATE OFFICER / MANAGING MEMBER
(Faxed signatures are acceptable)

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Manager's information must be completed below PLEASE PRINT CLEARLY

Last Name: Rupert First Name: Terrance MI: 1Home Address (include PO Box if applicable): 1401 W. Saltillo RoadCity: Roca County: Lancaster Zip Code: 68430Home Phone Number: 402-601-4771 Business Phone Number: 402-601-4771

Social Security Number: _____ Drivers License Number & State: _____

Date Of Birth: _____ Place Of Birth: East St. Louis, MOEmail address: rupert_terry@yahoo.com

Are you married? If yes, complete spouse's information (Even if a spousal affidavit has been submitted)

☒ YES☐ NO

Spouse's information

Spouses Last Name: Rupert First Name: Dianne MI: K

Social Security Number: _____ Drivers License Number & State: _____

Date Of Birth: _____ Place Of Birth: Lincoln, NebraskaAPPLICANT & SPOUSE MUST LIST RESIDENCE(S) FOR THE PAST TEN (10) YEARS
APPLICANT SPOUSE

CITY & STATE	YEAR FROM	YEAR TO	CITY & STATE	YEAR FROM	YEAR TO
Lincoln, Nebraska	2004	present	Lincoln, Nebraska	2004	present

MANAGER'S LAST TWO EMPLOYERS

YEAR FROM TO		NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
1986	Present	Self		402-601-4771

1. READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY.

Must be completed by both applicant and spouse, unless spouse has filed an affidavit of non-participation.

Has anyone who is a party to this application, or their spouse, EVER been convicted of or plead guilty to any charge. Charge means any charge alleging a felony, misdemeanor, violation of a federal or state law; a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

☒ YES ☐ NO

If yes, please explain below or attach a separate page.

Name of Applicant	Date of Conviction (mm/yyyy)	Where Convicted (City & State)	Description of Charge	Disposition
See attached				

2. Have you or your spouse ever been approved or made application for a liquor license in Nebraska or any other state?

☒ YES ☐ NO

IF YES, list the name of the premise(s):

Grandpa's Ribs and Secret Sauce

3. Do you, as a manager, qualify under Nebraska Liquor Control Act (§53-131.01) and do you intend to supervise, in person, the management of the business?

☒ YES ☐ NO

SPOUSAL AFFIDAVIT OF NON PARTICIPATION INSERT

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: www.lcc.ne.gov

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I acknowledge that I am the spouse of a liquor license holder. My signature below confirms that I will have not have any interest, directly or indirectly in the operation or profit of the business (§53-125(13)) of the Liquor Control Act. I will not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices or represent myself as the owner or in any way participate in the day to day operations of this business in any capacity. I understand my fingerprint will not be required; however, I am obligated to sign and disclose any information on all applications needed to process this application.

Dianne K. Rupert

Signature of spouse asking for waiver
(Spouse of individual listed below)

Dianne K. Rupert

Printed name of spouse asking for waiver

State of Nebraska

County of Lancaster

October 1, 2014

date

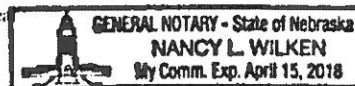
Nancy L. Wilken

Notary Public signature

The foregoing instrument was acknowledged before me this
Dianne K. Rupert

by _____
name of person acknowledged

Affix Seal



I acknowledge that I am the spouse of the above listed individual. I understand that my spouse and I are responsible for compliance with the conditions set out above. If it is determined that the above individual has violated (§53-125(13)) the Commission may cancel or revoke the liquor license.

Terrance T. Rupert

Signature of individual involved with application
(Spouse of individual listed above)

Terrance T. Rupert

Printed name of applying individual

State of Nebraska

County of Lancaster

October 1, 2014

date

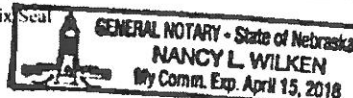
Nancy L. Wilken

Notary Public signature

The foregoing instrument was acknowledged before me this
Terrance T. Rupert

by _____
name of person acknowledged

Affix Seal



In compliance with the ADA, this spousal affidavit of non participation is available in other formats for persons with disabilities.
A ten day advance period is requested in writing to produce the alternate format.

**APPLICATION FOR LIQUOR LICENSE
CORPORATION
INSERT - FORM 3a**

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
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NEBRASKA LIQUOR
CONTROL COMMISSION

Officers, directors and stockholders holding over 25% shares of stock, including spouses, are required to adhere to the following requirements:

- 1) All officers, directors and stockholders must be listed
- 2) President/CEO and stockholders holding over 25% and their spouse(s) (if applicable) must submit fingerprints (2 cards per person)
- 3) Officers, directors and stockholders holding over 25 % shares of stock and their spouse (if applicable) must sign the signature page of the Application for License form 100 (even if a spousal affidavit has been submitted)

Attach copy of Articles of Incorporation (Articles must show barcode receipt by Secretary of States Office)

Name of Registered Agent: Terrance T. Rupert

Name of Corporation that will hold license as listed on the Articles

Rupert Enterprises, LLC

10062572

Corporation Address: 1329 North 27th

City: Lincoln State: NE Zip Code: 68503

Corporation Phone Number: 402-601-4771 Fax Number: N/A

Total Number of Corporation Shares Issued: N/A

Name and notarized signature of President/CEO (Information of president must be listed on following page)

Last Name: Rupert First Name: Terrance MI: T

Home Address: 1401 Saltillo Road City: Roca

State: NE Zip Code: 68430 Home Phone Number: 402-601-4771

Terrance T. Rupert

Signature of President/CEO

ACKNOWLEDGEMENT

State of Nebraska
County of Lancaster

25th day of September 2014

Date

The foregoing instrument was acknowledged before me this

by Terrance T. Rupert
name of person acknowledge

Affix Seal



GENERAL NOTARY - State of Nebraska
NANCY L. WILKEN
My Comm. Exp. April 15, 2018

List names of all officers, directors and stockholders including spouses (even if a spousal affidavit has been submitted)

Last Name: Rupert First Name: Terrance MI: T

Social Security Number: _____ Date of Birth: _____

Title: Manager Number of Shares N/A

Spouse Full Name (indicate N/A if single): Dianne K. Rupert

Spouse Social Security Number: _____ Date of Birth: _____

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COMMISSION

Spousal Affidavit

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Title: _____ Number of Shares _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Title: _____ Number of Shares _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Title: _____ Number of Shares _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

Is the applying corporation controlled by another corporation/company?

☐ YES

☒ NO

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If yes, provide the following:

- 1) Name of corporation _____
- 2) Supply an organizational chart of the controlling corporation named above
- 3) Controlling corporation **MUST** be registered with the Nebraska Secretary of State, copy of articles must be submitted with application §53-126

NEBRASKA LIQUOR
CONTROL COMMISSION

Indicate the Corporation's tax year with the IRS (Example January through December)

Starting Date: January 1 Ending Date: December 31

Is this a Non-Profit Corporation?

☐ YES

☒ NO

If yes, provide the Federal ID # _____

In compliance with the ADA, this corporation insert form 3a is available in other formats for persons with disabilities.
A ten day advance period is requested in writing to produce the alternate format.

**APPLICATION FOR TEMPORARY
OPERATING PERMIT (TOP)**

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814

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NEBRASKA LIQUOR
CONTROL COMMISSION

- ☒ Application for a temporary operation permit (TOP) must be included with the application for liquor license. TOP will not be considered without the completed application for a liquor license.
- ☒ Enclose documentation showing sale of business; document may be in the form of a purchase agreement/contract, management agreement or promissory note. Sale of business document must include the following: name of business being sold, purchase date or closing date within 2-3 weeks of requesting TOP and must be signed by the seller and buyer.
- ☐ TOP's are valid for 90 days from date of issuance and cannot be extended past the expiration date (no exceptions).
- ☐ Seller's liquor license will terminate upon issuance of the TOP.
- ☐ If the seller's liquor license is up for renewal during the TOP it will not be necessary for the seller to renew.

NAME OF CURRENT LICENSEE (SELLER):

SELLER'S LICENSE #:

GNS Corporation

B 16363

On (date) seller and buyer entered into a contract for sale of the

business known as (TRADE NAME):

Git N Split

Buyer seeks to obtain a temporary operating permit (TOP) to allow buyer to operate the business under the same terms and conditions of the current licensee; subject to approval by the Nebraska Liquor Control Commission (NLCC) for a period not to exceed 90 days (no exceptions).

Seller hereby declares that they are current on all accounts with all Nebraska licensed wholesalers under section §53-123.02. Any seller who provides false information regarding such accounts is guilty of a Class IV misdemeanor for each offense.

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